DEC 2 2 2005

13	ELON FO	P. ENSIGN OF TIME LIND	FR 37 CFR 1 136(a)	Docket Number 2747/1021
In re Application of Shaker A. Mousa				
CERTIFICATE OF MAILING I hereby certify that this correspondence is being				
deposited with the United States Postal Service with sufficient postage for first class mail in an envelope			Application Number 10/667,216 Filed September 19, 2003	
addressed to Mail Stop Amendment, Commissioner For OXIDIZED HEPARIN FRACTIONS AND THEIR USE IN				IONS AND THEIR USE IN
for Patents, P.O. Box 1450, Alexandria, VA 22313- 1450, on December 20, 2005.				
Signa	iture: 📿	(Inwhaler	Group Art Unit 1623	Examiner Devesh Khare
Name	e:	Jo Ann Whalen	Î	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a				
reply in the above identified application.				
The requested extension and appropriate entity fee are as follows (check time period desired):				
		One month (37 CFR 1.17	'(a)(1)) - (\$60/\$120)	\$
		Two months (37 CFR 1.1	7(a)(2)) - (\$225/\$450)	\$
	×	Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) \$510.00		
		Four months (37 CFR 1.1	\$	
×	Applicant claims small entity status.			
×	A check to cover the fee is enclosed.			
	Payment by credit card. Form PTO-2038 is attached.			
	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.			
The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number 14-1138  I have enclosed a duplicate copy of this sheet.				
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the ☐ applicant/inventor				
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
	×	attorney or agent of recor		
atterney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a)				
			December 20, 2005	
		\ \ \ \ \ \ Signature		Date
		Joseph M. Noto Typed or printed na	ma —	(585) 263-1601 Telephone Number
1 yped of printed name				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
		nan one signature is required, see	ociow.	
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